FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

196/000
OMB APPROVAL
OMB Number: 3235-0076
Expires: April 30, 2008
Estimated average burden
hours per response: 16.00
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SEC USE ONLY

DATE RECEIVED

Serial

Prefix

	<u> </u>									
Name of Offering (check if this is an amendment and name has changed, and indicate change.)										
Goldman Sachs Hedge Fund Opportunities, LLC: Units of Limited Liability Company Interests										
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Mail Processing										
Type of Filing: D New Filing D Amendment Section										
A. BASIC IDENTIFICATION DATA										
I. Enter the information requested about the issuer										
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	MIN									
Goldman Sachs Hedge Fund Opportunities, LLC Washington, DC										
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (in diding Area Code)									
c/o Goldman Sachs Hedge Fund Strategies LLC, One New York Plaza, New York, NY 10004	(212) 902-1000									
Address of Principal Business Operations (if different from Executive Offices) (Number and Street, City, SPROCESSEI	Telephone Number (Including Area Code)									
Brief Description of Business APR 2 4 2008										
To operate as a private investment fund.										
THOMSON REUTI										
Type of Business Organization	08046466									
□ corporation □ limited partnership, already formed	other (please specify):									
☐ business trust ☐ limited partnership, to be formed	Limited Liability Company									
Month Year										
Actual or Estimated Date of Incorporation or Organization: 1 1 0 5	☑ Actual ☐ Estimated									
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbrevia	ation for									
State: CN for Canada; FN for other foreign jurisdiction) D E										
GENERAL INSTRUCTIONS										

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collections of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA
2. Enter the information requested for the following:
* Each promoter of the issuer, if the issuer has been organized within the past five years;
* Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
* Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
Each general and managing partner of partnership issuers.
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☑ General and/or Managing Partner
Full Name (Last name first, if individual)
Goldman Sachs Hedge Fund Strategies LLC (the Issuer's Managing Member)
Business or Residence Address (Number and Street, City, State, Zip Code)
One New York Plaza, New York, NY 10004
Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual)
Rumsey Development Corp
Business or Residence Address (Number and Street, City, State, Zip Code)
P.O. Box 18, Brooks, CA 95606
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director* ☐ General and/or *of the Issuer's Managing Member Managing Partner
Full Name (Last name first, if individual)
Asali, Omar
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o Goldman Sachs Hedge Fund Strategies LLC, One New York Plaza, New York, New York 10004
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director* ☐ General and/or *of the Issuer's Managing Member Managing Partner
Full Name (Last name first, if individual)
Barbetta, Jennifer
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o Goldman Sachs Hedge Fund Strategies LLC, One New York Plaza, New York, New York 10004
Check Box(es) that Apply:
Full Name (Last name first, if individual)
Ort, Peter
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o Goldman Sachs Hedge Fund Strategies LLC, One New York Plaza, New York, New York 10004
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)

☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

□ Promoter

(Number and Street, City, State, Zip Code)

Check Box(es) that Apply:

Business or Residence Address

Full Name (Last name first, if individual)

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General and/or

Managing Partner

: 4				B. IN	FORMAT	TON ABO	UT OFFI	ERING				
											Yes	No
1. Has th	e issuer solo	d, or does th								****************		Ø
Answer also in Appendix, Column 2, if filing under ULOE.												
2. What is the minimum investment that will be accepted from any individual?								\$1,000,000*				
*The Managing Member of the Issuer, in its sole discretion, may accept subscriptions in lesser amounts. 3. Does the offering permit joint ownership of a single unit?								Yes ☑	No			
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.								offering. th a state				
Full Name	(Last name	first, if ind	ividual)									
Goldman.	Sachs & C	co.										
	or Residence		Number and	Street, City	y, State, Zip	Code)						
	Street, Nev			04								
Name of A	Associated B	roker or Do	ealer									
Canana in W	Vhich Perso	n Listed He	a Calinitad	ar Intende t	a Calinit Du	wah na awa						
	vnich Perso All States" (.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				☑ AI	I States
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[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	(Last name	first, if ind	ividual)									
			 		<u> </u>							
Business of	Business or Residence Address (Number and Street, City, State, Zip Code)											
Name of A	Associated B	roker or Do	aler				<u> </u>					
	Vhich Perso All States" o										ПА	l States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[BD]	[MA]	[. b] [MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	(WI)	[WY]	[PR]
Full Name	: (Last name	first, if ind	ividual)			·						
Business o	or Residence	Address (?	Number and	Street, City	y, State, Zip	Code)						
Name of A	Associated B	roker or De	ealer			-						
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)												
•				•								All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA] [MN]	[HI] [MS]	[ID] [MO]
[IL] [MT]	[IN] [NE]	[IA] [NV]	(KS) [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

TN] [TX] [UT] [VT] [VA] [WA] [WV]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sigma\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.					
	Type of Security		Aggregate Offering Price		A	Amount Already Sold
	Debt	\$_	0	\$		0
	Equity (Shares)	\$_	0	\$		0
	□ Common □ Preferred	-				
	Convertible Securities (including warrants)	\$_	0	\$		0
	Partnership Interests	\$_	0	\$		0
	Other (Specify: Units of Limited Liability Company Interests)	\$_	732,417,036	\$		732,417,036
	Total	\$	732,417,036	\$		732,417,036
	Answer also in Appendix, Column 3, if filing under ULOE.					
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Number			Aggregate Dollar Amount
			Investors			of Purchases
	Accredited Investors	_	356	\$	_	732,417,036
	Non-accredited Investors	_	0	\$	_	0
	Total (for filings under Rule 504 only)	_	N/A	\$		N/A
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		Type of Security			Dollar Amount Sold
	Type of offering Rule 505		N/A	\$		N/A
	Regulation A	_	N/A	\$	_	N/A
	Rule 504	_	N/A	\$	_	N/A
	Total	_	N/A	•		N/A
tl tl	.a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of the expenditure is not known, furnish an estimate and check the box to the left of the estimate.		WA	Ę.		
	Transfer Agent's Fees			\$	_	0
	Printing and Engraving Costs			\$	_	0
	Legal Fees		ゼ	\$		277,128
	Accounting Fees			\$	_	0
	Engineering Fees		0	\$		0
	Sales Commissions (specify finders' fees separately)			\$	_	0
	Other Expenses (identify)			\$	_	0
	Total		Ø	\$	_	277,128

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS									
	b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."							732,139,908	
5.	Indicate below the amount of the adjusted to be used for each of the purposes shown. furnish an estimate and check the box to payments listed must equal the adjusted groto Part C - Question 4.b. above.								
					Payments to Officers, Directors, & Affiliates			Payments To Others	
	Salaries and Fees			\$	0	. 🗆	\$_	0	
	Purchase of real estate			s_	0		\$_	0	
	Purchase, rental or leasing and installation	of machinery and equipment		s	0		\$_	0	
	Construction or leasing of plant buildings a	nd facilities		s	0		\$_	0	
	Acquisition of other businesses (including this offering that may be used in exchar another issuer pursuant to a merger)	s of	•	0	_	¢	0		
	•		_	\$_	0		³-	0	
	Repayment of indebtedness			<u>s</u> —	0		\$-		
	Working capital			\$	0	. –	\$ _	0	
	Other (specify): Investment Capital			s	0	. Ø	\$_	732,139,908	
	Column Totals		\$	0	. 2	\$ -	732,139,908		
	Total Payments Listed (column totals added	ļ	g \$	732,	39,9	08			
		D. FEDERAL SIG	NATURE						
The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.									
Iss	ucr (Print or Type)	Signature	\mathcal{I}		Date				
	Soldman Sachs Hedge Fund Opportunities, LC April 15, 2008								
Na	Name of Signer (Print or Type) Title of Signer (Print or Type)								
Ka	Kathryn Pruess Vice President of the Issuer's Managing Member								
					EN	D)		

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).